

**ATTORNEY DOCKET NO. 04159.0001U2  
PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of )  
)  
**PAREKH, Sanjay M.** ) Group Art Unit: **2152**  
) )  
Application No. **09/632,959** ) Examiner: **Lan Dai T. Truong**  
) )  
Filing Date: **August 4, 2000** ) Confirmation No.: **1066**  
) )  
For: **DETERMINING GEOGRAPHIC** )  
**LOCATIONS OF PRIVATE** )  
**NETWORK INTERNET USERS** )

**TRANSMITTAL LETTER**

**Mail Stop AF**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.  
Customer Number 23859

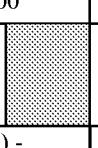
September 13, 2007

Sir:

Transmitted herewith are the following in the above-identified application:

- Notice of Appeal  
 Fee as calculated below  
 No Additional Fee Required  
 Replacement Drawings

- Petition to Extend Time  
 Supplemental Declaration  
 Terminal Disclaimer  
 Other \_\_\_\_\_

CLAIMS AS AMENDED								
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDITIONAL FEE		
Total Claims				X \$50.00		\$0.00		
	Independent Claims			X \$200.00		\$0.00		
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim				+ \$360.00		\$0.00		
<input checked="" type="checkbox"/> Notice of Appeal				+ \$500.00		\$500.00		
EXTENSION FEE	1 <sup>st</sup> Month \$120 <input type="checkbox"/>	2 <sup>nd</sup> Month \$450 <input type="checkbox"/>	3 <sup>rd</sup> Month \$1020 <input checked="" type="checkbox"/>	4 <sup>th</sup> Month \$1590 <input type="checkbox"/>	5 <sup>th</sup> Month \$2160 <input type="checkbox"/>	 \$1020.00		
<input checked="" type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -						-\$760.00		
<b>TOTAL FEE DUE</b>						<b>\$760.00</b>		

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APPLICATION NO. 09/632,959**

Payment:

- A check in the amount of \$\_\_\_\_\_ is enclosed.
- Payment by credit card in the amount of \$760.00 is enclosed.
- The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$\_\_\_\_ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

Respectfully submitted,

NEEDLE & ROSENBERG, P.C.

/Jason S. Jackson/

Jason S. Jackson

Registration No. 56,733

NEEDLE & ROSENBERG, P.C.  
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